

Minutes of the State Board of Health
July 12, 2000

A meeting of the Washington State Board of Health (WSBOH) was held at the University of Washington South Campus Center, Seattle, Washington. The public meeting of the WSBOH was called to order by Linda Lake, Chair, at 9:40 am that addressed the attendees with the following statement:

“This is a public meeting of the WSBOH held under provision of RCW 43.20. Notice of the meeting was provided in accordance with provisions of RCW 34.05, the Administrative Procedures Act. Those members having any conflict of interest on any item coming before the Board will report that conflict with respect to the particular subject under consideration. In case of challenge of any Board members by the public, the Board shall decide the status of the challenged members to participate before considering the substance of the matter.”

The following Board members were present:

Linda Lake, Chair
The Honorable Neva J. Corkrum, Vice Chair
Ed Gray, MD
Carl S. Osaki, RS, MPH
Mary Selecky, Secretary, Department of Health

Charles R. Chu, DPM
Joe Finkbonner
Thomas H. Locke, MD, MPH
The Honorable Margaret Pageler, JD
Vickie Ybarra, RN, MPH

State Board of Health Staff present:

Don Sloma, Executive Director
Heather Boe, Executive Assistant
Doreen Garcia, Senior Health Policy Advisor
Hal Dygert, Senior AAG Advisor

Beth Berendt, Senior Health Policy Advisor
Janice Englehart, Senior Health Policy Advisor
Desiree Robinson, Office Assistant Senior

Guests and Other Participants

James Baggs, Sharp/Labor & Industries
Philip Bereano, ACLU
David Bonata, Labor & Industries
Tom Burbacher, University of Washington
Brent Butler, Citizen
Oscar Cerda, Department of Health
Nancy Cherry, Public Health Services King County
Kathleen Crompt, MCPP Healthcare Consulting
Constance Daruthayan, Citizen
Su Docekal, Radical Women
James L. Gale, University of Washington
Rodger Green, Citizen
Dion Hansen, Citizen
Ken Hilde, Wyeth Lederle
Richard Jackman, Resist the List
Joel Kaufman, University of Washington
John Kobayashi, Department of Health

Bill Lake, Resist the List
Sarah Luthers, Resist the List
Barbara Mauer, MCCP Healthcare Consulting
Michael McAfoose, Rape Agency and Social Service
Ann McCulloh, Wyeth Lederle
Francis A. Podrebarac, MD
Neil Rambo, University of Washington
Jeff Schouten, MD, JD
Sarena Seifer, Community-Campus Partnerships for Health
Kelly Shaw, Department of Health
Greg Smith, Department of Health
Chris Spitters, Department of Health
Alejandra Tres, Consultant
Chuck Tresen, University of Washington
Pat Wahl, Dean of School of Public Health, UW

Linda Lake introduced herself to the Board as the new Board Chair, appointed July 10, 2000 replacing Dennis Braddock who was recently appointed as the Secretary of Department of Social and Health Services. She is currently and has been serving as the Executive Director of the Pike Market Medical Clinic (PMMC) in Seattle for almost three years. The PMMC is a community health center that has been around for 22 years providing primary care to a variety of people living and working in the downtown Seattle area. The clinic serves only adults, primarily low-income, elderly, homeless, drug and substance abusers, and people with mental illness.

Chair Lake worked as a speech pathologist for medically fragile infants and young children in the mid 70s. She received her MBA and in 1994 and became the Executive Director for Seattle Counseling Service for Sexual Minorities in Seattle providing services to gay, lesbian, transsexual, and transgender folks on Capitol Hill.

APPROVAL OF AGENDA

- *Motion: To approve the July 12, 2000 agenda as submitted.*
Motion/Second: Locke/Corkrum the motion passed.

ADOPTION OF JUNE 14, 2000 MEETING MINUTES

- *Motion: To approve the June 14, 2000 minutes as corrected.*
Motion/Second: Locke/Selecky the motion passed.

WELCOME AND OPENING REMARKS

Pat Wahl, Dean, University of Washington School of Public Health and Community Medicine, welcomed the Board and explained the organization of Health Sciences and Medical Affairs at the University of Washington (UW). The UW has the only accredited School of Public Health in the Northwest region of the country. The School has five divisions and is primarily a graduate school.

PRESENTATION AND DISCUSSION OF UNIVERSITY OF WASHINGTON ACTIVITIES RELEVANT TO SBOH PRIORITIES

Pat Wahl, Dean, University of Washington School of Public Health and Community Medicine continued her remarks by explaining her efforts to design a strategic plan, making it consistent with the state Department of Health's strategic plan and with the Board of Health's priorities. She has started with visits to most local health jurisdictions and has found that most local health department employees lack formal public health training credentials. She then asked Jim Gale, head of the Department of Epidemiology, to describe the need for funding to enable local health department employees to travel to UW for formal training. Associate Dean of Academic Affairs, Fred Connell, described a desired comprehensive, and integrated general Master of Public Health Degree. Jack Thompson updated the Board on the Northwest Center of Public Health Practice and its efforts on workforce development and training in WA as well as Alaska, Montana, Idaho, Oregon, and Utah. Aaron Katz presented a description of the Health Policy Analysis Program and how its work relates to the Board's priorities (i.e. the Health Policy Legislative Conference, rural issues, and improving school diversity). Dean Wahl closed by mentioning work at the School on the social determinants of health.

Carl Osaki, RS, MSPH asked Dean Wahl to discuss her efforts with faculty. She described her efforts to attract new faculty from the field of public health practice rather than only researchers. Chair Lake expressed interest in genetics and asked about the genetics conference the UW is holding July 17-18, 2000 Bell Street Conference Center in Seattle (See attached brochure).

ENVIRONMENTAL JUSTICE UPDATE

Mr. Osaki presented an update on the work of the Environmental Justice Subcommittee's work (see Tab 6). Environmental Justice is one of the Board's five priority areas. He is interested in collaborating with the Children's Subcommittee and the Health Disparities Subcommittee. On July 26, 2000 the Board will be sponsoring an interagency meeting on environmental justice in Olympia. On September 25, 2000 the Board will be cosponsoring a meeting with the Thurston County Council on Cultural Diversity and Human Rights. On September 29, 2000, the Board will cosponsor a statewide environmental justice forum in Seattle in conjunction with a town meeting. Secretary Mary Selecky stated that she finds environmental justice is often characterized as an environmental health issue, neglecting that it is also a children's issue, and a diversity issue.

REPORT FROM UNIVERSITY OF WASHINGTON CENTER FOR ECOGENETICS AND ENVIRONMENTAL HEALTH

Mr. Osaki introduced Tom Burbacher, Ph.D., Director, National Institute of Environmental Health Sciences (NIEHS) Center Community Outreach and Education Program. Dr. Burbacher discussed grant opportunities from the NIEHS. He described the UW grant received from NIEHS to hold one of the national town meetings at Mt. Zion Church in Seattle. Many community-based organizations are involved in this meeting to be held on September 29-30, 2000.

DEPARTMENT OF HEALTH (DOH) UPDATE AND LEGISLATIVE UPDATE

Secretary Selecky first discussed the fire that occurred in Benton County near the Hanford Nuclear Reservation recently. The Honorable Neva Corkrum discussed how things were handled in Benton County during the crisis. Since the reservation is a federally declared national monument, both the county and the state were severely limited in their ability to respond. Ms. Corkrum is awaiting confirmation of how the crisis may have been limited if the county was allowed to respond. Secretary Selecky then discussed how growers improved some farm worker housing due to joint efforts among state, and local agencies. She also provided updates on tobacco cessation grants and settlement dollars.

Patty Hayes, Department of Health Director of Legislative, Policy, and Constituent Relations, reported on DOH budget development based on OFM directions to (1) align with identified agency priorities and performance measures, (2) be consistent with Governor priorities, and (3) be zero-sum. DOH is also beginning a project looking at medical errors based on passed House Bill (HB) 2798. Finally, Ms. Hayes discussed a federal report on immunization policy. Ms. Hayes met with about half the WA delegation in Washington, D.C. regarding needed immunization infrastructure funding. She requested a joint letter from DOH and the Board to the WA delegation stating that WA is poised and ready for full funding.

- ***Motion: To send a joint letter.***
Motion/Second: Locke/Osaki the motion passed unanimously.

SBOH STAFF ANNOUNCEMENTS

Don Sloma, Washington State Board of Health Executive Director, announced information provided in Tab 9, including a summary of the upcoming genetics conference held by UW. He announced that the Board would need to recruit some new staff because staff member Kay DeRoos decided to leave her position with the Board and because additional staffing changes are expected in January.

UPDATE ON LEGAL ISSUES

Hal Dygert, Senior Assistant Attorney General had no report this month.

DISCUSSION OF PUBLIC FORUM PROCESS

Thomas H. Locke, MD, MPH, led a discussion on the next scheduled forum for September in Port Townsend. He suggested the Board hold a more focused and open forum on child health and access. He wants to meet many different needs in the Port Townsend community. Board members Secretary Selecky, The Honorable Margaret Pageler, JD, and Ms. Corkrum all agreed that an alternative format would be useful. Dr. Locke proposed not to have an evening session, however Vickie Ybarra, RN, MPH, stated that an evening session was important to some people who could not attend in the daytime. Mr. Sloma asked for direction from the Board on changes they want. Chair Lake asked staff to take the lead from Dr. Locke on the September forum.

ACCESS TO CRITICAL HEALTH SERVICES UPDATE

Beth Berendt, Washington State Board of Health staff, introduced MCPP Healthcare Consultants Barbara Mauer, Kathleen Crompt, Kathleen O'Conner, MD, MPH, who are performing the study on access to critical health services for the Board based on the standards created by the Public Health Improvement Plan. (See overheads attached). Proposed core set of critical services, will be presented in September. This list will need to be revisited because it is an ongoing process and the list will change over time. Board questions: Mr. Osaki expressed concern that environmental health was not considered as a candidate for critical health services. He does not agree with the assumption on page 15 of handouts. He stated that he does not see environmental health as separate and thinks other environmental health officials will also be concerned. Secretary Selecky referred to page two of the handout and suggested looking at this project in the context of the overall standards work, where environmental health is included.

Dr. Locke answered the consultant's questions to the Board. He said the length of the list is much less important than the defensibility of the list. Ms. Pageler stated that injury prevention and trauma care are missing. Consultants answered that these services would be under general access to health services and in behavioral health risk factors. Secretary Selecky questioned the finding regarding prenatal care (page 17). Ms. Crompt said they found that it is shown effective for high-risk populations, not for all pregnant women. Mr. Sloma pointed out that the criteria may not be properly refined as yet and the Board needs to provide feedback. The purpose of the list is to provide a tool to local health jurisdictions to use to determine where they might chose to focus their assessment and policy development efforts. It is also a tool to measure access at the local and state level to be measured by local healthy jurisdictions and the State Department of

Health. Ms. Ybarra asked if other states have done this same work. Mr. Sloma stated that Oregon created a similar list, but for a different purpose. Their purpose was to determine what their Medicaid program would pay for.

HEALTH DISPARITIES: PROPOSAL TO MODIFY SCHOLARSHIP AND LOAN FORGIVENESS PROGRAM

Ms. Ybarra and Joe Finkbonner, accompanied by Ms. Berendt clarified the original intent of their initial report and recommendations on reducing disparities in health status for racial and ethnic minorities. As a result of staff research, it was determined that the recommendation to expand the loan repayment and scholarship program contained in the Health Disparities Workplan should be deferred until the workforce diversity workgroup completed its review of current outreach and health care workforce programs. It was recognized that other coalitions might wish to advance legislation during the 2001 Legislative Session and that the Board should consider supporting such initiatives if such legislation included specific and measurable efforts to increase identification and training of ethnic and racial minorities in health care professions.

Secretary Selecky clarified that there is no agreement being negotiated between DOH and the Higher Education Coordinating (HEC) Board to transfer administrative oversight of the program to DOH

Following discussion the Board considered the following modification to Recommendation No. 3 contained in the Health Disparities Workplan:

“For the 2001 Legislative Session, The Sate Board of Health will consider supporting budget and policy initiatives advanced by others, to expand the Health Professional Loan Repayment and Scholarship program if the expansion initiative contains specific and measurable efforts to increase identification and training of ethnic and racial minorities in health care professions. “

- ***Motion: To adopt proposed recommendation.***
Motion/Second: Pageler/Selecky the motion passed unanimously.

The Board also empowered Mr. Finkbonner and Ms. Ybarra to review and determine whether the Board should support any expansion proposal that may come to the Board in the next few months

PUBLIC HEARING ON PROPOSED CHANGES FOR CHAPTER 246-101, NOTIFIABLE CONDITIONS

Dr. Locke and Greg Smith from the Department of Health summarized the proposal for the rule revision on Notifiable Conditions, highlighting the manner in which this revised rule differs from the existing rule. Mr. Smith reviewed the current and proposed system of disease reporting in the State. (See the corresponding handouts for detailed information on the rule.) He reviewed the list of conditions that will be added to and deleted from the notification requirements. Dr. Locke reviewed the Subcommittee’s on-going work. He summarized that the Subcommittee pursued the possibility of incorporating standards for electronic data gathering from health care claims in its proposal, but found this not to be a feasible option. Mr. Smith elaborated on a process of drafting the proposed rule that included stakeholder comments solicited through the Web, public meetings, and direct mail. A total of 150 comments were collected and incorporated into the proposed rule. Dr. Locke elaborated on the final amendments that reflect this stakeholder input. Secretary Selecky made several comments on the subject of electronic reporting. She clarified that some electronic reporting and data transmission now occurs and that there are statutes in place to protect confidentiality with any kind of data transfer. She added that DOH has an elaborate security system to protect this information further.

David Banauto, MD, MPH, occupational physician and an associate medical director for the Safety and Health Assessment and Research Prevention program with Labor and Industries testified in support of the notifiable conditions rule emphasizing the seriousness of occupational asthma. (See attached handout.)

Mr. Francis Albert Podrebaracero, MD, testified on behalf of people with HIV/AIDS and others from “Resist the List.” He stated that he recognizes the importance of reporting, but warned about the problem of confidentiality. He raised the issue of discrimination associated with AIDS, using several examples to show how he has been personally discriminated against because of his diagnosis. He shared that he lost his job because of his need to work part-time; he was denied treatment for a knee injury; and was placed in restraints for a period of time at Harborview after being labeled with AIDS related dementia.

Sue Docekal, representing Radical Women expressed concern about electronic reporting and the use of information by the insurance companies. Dr. Locke clarified that all reference to using electronic claims data would be deleted. She also expressed concern about HIV reporting, especially for women who are at risk.

She questioned how the State Board of Health would use the names collected to improve the quality of care and services for these people. She also expressed concern about the additional conditions added to the final list, noting birth defects and the issues of privacy for women. If any new conditions are added, she said that a public hearing should be held and that adequate notice should be given to the community groups. If public meetings are held better work needs to be done to reach out to community groups beyond the health care provider community. She said that she would like to see the SBOH spend more time on providing access to care and less on data gathering that leads to no end.

Bill Lake with Resist the List described himself as a gay man living with AIDS. He said that he was pleased to hear that the electronic data gathering would be dropped from the rule proposal. He stated his concern about HIV reporting. He warned that name reporting does not do anything to prevent disease. Efforts should be re-directed to prevention and education.

Jeff Schouten, MD, introduced himself as one who works with people with AIDS and asked that the board clarify the definition of Hepatitis C for the purpose of this rule. He stated that it is also necessary for the Board to clarify its Hepatitis C reporting requirement. Dr. Locke clarified that State Epidemiologist, Dr. Kobayashi is reviewing this piece of the proposed rule. He also expressed concern about the way this requirement will interface with the anonymous reporting requirements and how the respective databases will interface. He added that he supports the rule.

Philip Bereano, representing the American Civil Liberties Union (ACLU) discussed many civil liberties issues relevant to this rule. He stated that these liberties go beyond issues of privacy. Citizen oversight of government, he noted is of particular importance, arguing that the Board did not engage the necessary parties in the preparation of this rule. He stated that the ACLU does not have a copy of the proposed rule and that they were not engaged in the process. He argued further that citizen participation should not be sacrificed in the name of efficiency and that efficiency of government should not be promoted over an individual's right to privacy. He stressed the unique sensitivity associated with HIV/AIDS reporting and the corresponding policy implications, contrasting it with the more straightforward reporting of blood lead levels. Mr. Bereano questioned the Board's rationale for including some of the diseases on the list. He recommended that the Board not adapt the rule today and offered to assist staff and the Board.

Brent Butler remarked on the composition of the Board and the absence of any African American representation. He listed several health disparities present in the African American Community. He expressed his concern that the rule might cause fewer individuals to seek care because they might be concerned about having their identity and diagnosis disclosed. He argued that the Board needs to diversify opinions that go into policy decision-making. He stated that he would submit a statement of approximately 200 names supporting his statement.

Michael McAfoose, representing Communities Against Rape and Abuse suggested that the State spend its resources enforcing existing rules. He expressed particular concern to Tacoma-Pierce County and whether or not they were destroying names on the mandatory reporting list after 90 days. He requested that the SBOH be accountable to the reporting requirements. He suggested that if the Board intends to track diseases, they also have a responsibility to report back to the community on what they find. Mr. McAfoose stated his objections to the proposed rule. He argued that the proposed reporting requirements deter people (especially young people) from seeking treatment. He also echoed the concern that he was not notified about the meeting and would like to be added to the mailing list. He urged the Board to incorporate more real public input in the process. He suggested that the Board or the public health agencies go out to the public to solicit input. This might be a more effective way to actually collect citizen concerns related to the rule, he stated. He requested that the SBOH not take action today.

Constance Daruthayan, student at the University of Washington commented that the process of observing the Board's work has been quite an education. She expressed her concern however of the lack of public participation in this process. There is a real need she stated to incorporate people of color, women, and working class people in the public health process.

Richard Jackman, representing Resist the List requested the Board delay voting or vote no on this proposed rule until more information has been gathered. He stated that the Board's charge is to collect information and opinions from those beyond its usual circle of influence (i.e., DOH). He requested that the Board survey more of the affected population before voting on this rule. Mr. Jackman stated that he was pleased to hear of the Board's intention to remove electronic reporting from the rule. He continued to argue however that names reporting does not serve public health, noting that many states are successfully using a unique identifier system. He charged that this rule adds to the stigma associated with AIDS and that it may not offer the best vehicle for reliable data collection because it discourages people (especially health care workers) from seeking care, discourages some doctors from actually reporting, and opens the possibility for false positive reporting.

Dr. Joel Kaufman provided written testimony to the Board. He expressed his overall support of the inclusion of occupational and environmental diseases (lead poisoning and occupational asthma) to the list of notifiable conditions.

Dr. Locke reviewed the Board's process from this point. Hal Dygert described the options available to the Board for acting on the amendments

- ***Motion: To approve the packet, Notifiable Conditions Rule Adoption Motions filed as CR 102 WSR 00-12-101.***
Motion/Second: Locke/Finkbonner
- ***Motion: To amend CR-102 WSR 00-12-101 by adding the statements of findings and effect on the sheet entitled Proposed Amendments to Chapter 246-101 as filed on 6/6/00 as CR-102 WSR 00-12-101 and the additional amendment pertaining to Hepatitis C as a group.***
Motion/Second: Locke/Finkbonner the motion passed unanimously.
- ***Motion: To adopt the amended packet, Notifiable Conditions Rule Adoption Motions filed as CR 102 WSR 00-12-101.***
Motion/Second: Locke/Finkbonner the motion passed unanimously.

ADJOURNMENT

The meeting was adjourned at 5:10 p.m.

WASHINGTON STATE BOARD OF HEALTH

Linda Lake, Chair